**OR** 

a valid OMB control number.

## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial

Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	ber 3771P2392							
First Named Inventor	KOSS, PHILLIPS A.							
COMPLETE IF KNOWN								
Application Number	/							
Filing Date								
Group Art Unit								
Examiner Name								

As a below named inve	ntor, I hereby declare that:				* ****					
My residence, post office address, and citizenship are as stated below next to my name.										
·										
riairies are listed below) (	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
A COMMISSI	ON FREE AUCT	ION SYSTEM A	ND MET	HOD						
THEREFOR										
the specification of which	h (Titi	le of the Invention)								
is attached hereto										
was filed on (MM/0	DD/YYYY)	as Unite	d States Annlica	ation Number or PC	T International					
Application Number	<u> </u>			MOH NUMBER OF A	•					
<u> </u>		as amended on (MM/DD/Y)	·		(if applicable).					
amended by any amendm	eviewed and understand the ent specifically referred to abo	contents of the above ident ove.	ified specificatio	on, including the cla	aims, as					
i acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 CF	FR 1.56.						
I hereby claim foreign prior certificate, or 365(a) of any	ity benefits under 35 U.S.C. PCT international application	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the country of the than the United States of								
America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
or of any PCT international a	ave also identified below, by application having a filing date	checking the box, any foreign before that of the application	gn application for on which pri	other than the Un or patent or invento ority is claimed.	nited States of or's certificate,					
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Prior Foreign Application	application having a filing date	Foreign Filling Date	gn application to	or patent or inventority is claimed.  Certified Cop	or's certificate,  by Attached?					
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Prior Foreign Application Number(s)  Additional foreign application	Country  ation numbers are listed on a	Foreign Filling Date (MM/DD/YYYY)  supplemental priority data:	Priority Not Claimed	Certified Cop YES	or's certificate,					
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Prior Foreign Application Number(s)  Additional foreign application	Country  ation numbers are listed on a under 35 U.S.C. 119(e) of any	Foreign Filling Date (MM/DD/YYYY)  supplemental priority data:	Priority Not Claimed	Certified Cop YES	or's certificate,					
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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: X Customer Numb or Bar Code Lat		1	1 / 3 3 1 1 4		OR O	Correspondence address below			
Name									
Address									
Address									
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<u>լ</u> Country	Country			Fax					
Lhereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been file	ed for this unsigned inventor			
Given Name  (first and middle [if any]) Phihlips/A.				Family Name or Surname Koss					
Inventor's Signature Date (0/17/0)									
Residence City Ft Hills			State A	Z	Country USA	Citizenship USA			
Mailing Address 15357 East	Verbena	ì							
Mailing Address	<b></b>			τ					
City Ft Hills	State Ari	izona	1	ZIP	85268	Country			
NAME OF SECOND INVENTOR				A petiti	on has been file	ed for this unsigned inventor			
Given Name (first and middle [if any])  Family Name or Surname									
Inventor's Signature Date									
Residence: City			State		Country	Citizenship			
Mailing Address									
Mailing Address									
City	State			ZIP		Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto									